

Hematuria Catheter Irrigation Procedure:

Supplies:

- Normal Saline (salt water)
- Irrigation Tray (set includes syringe, collection tray, and container for normal saline solution)
- Towel

Irrigate through the catheter every four hours during the day using Normal Saline (do not use tap water). It is important to irrigate more frequently if the urine output has diminished or if the Blake drain or Penrose drain seem to have a significant increase in the amount of output. No need to wake up overnight to irrigate, last irrigation should be before you go to bed, and then upon waking in the morning.

It is important to irrigate in order to keep the catheter free of mucous plugs, or blood clots so that urine is able to drain out and not back up into the kidneys.

The following procedure should be used when irrigating the catheter.

- Wash your hands thoroughly with soap and water.
- Draw up 60mL of Normal Saline in the syringe.
- Disconnect the catheter from the drainage bag.
- Hold the tip of the catheter upright between the thumb and first finger. Place the tip of the syringe into the catheter.
- Inject 60-120mL's of the saline solution into the catheter.
- Gently withdraw the fluid from the catheter with the syringe.

If resistance is met:

- ✓ Slightly reposition the catheter if possible and try again to withdraw fluid.
 - ✓ If unable to withdraw fluid simply disconnect the syringe and allow fluid to drain into the tray.
- Detach the syringe from the catheter and empty the syringe into the tray.
 - Repeat the process until you no longer see mucus or blood clots when withdrawing.
 - Clean your equipment with warm soapy water. Rinse and pull the syringe apart to air dry until the next irrigation.

Please note:

It is important to stay hydrated. You should drink at least 2 liters of decaffeinated liquids per day. There may be some incidental light bleeding during or after irrigation. This is normal as things are healing.

If you are having any difficulties call the Urology Office at (323)865-3700